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|--------------------|------|-----|--------|------|-----|
| Please type a plus | sign | (+) | inside | this | box |

PTO/SB/05 (11-00) Approved for use through 10/31/2002. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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| UTILITY            |
|--------------------|
| PATENT APPLICATION |
| TRANSMITTAL        |

T

| Attorney Docket No. | TI-34717.1  |  |
|---------------------|-------------|--|
| First Inventor      | Kaiping Liu |  |
|                     |             |  |

Title | Method to Produce Localized Halo for MOS Transistor

| (Only for new nonprovisional applications under 37 CFR 1.5   | 3(b)) Expre              | ress Mail Label No. EV333323979US  |  |  |  |  |
|--|--------------------------|--|--|--|--|--|
| APPLICATION ELEMENT See MPEP chapter 600 concerning utility patent applie  |                          | ADDRESS TO:  Assistant Commissioner for Patents Box Patent Application Washington, DC 20231      |  |  |  |  |
| 1. <b>X</b> Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original, and a duplicate for fee processing   | na)                      | 7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)                       |  |  |  |  |
| 2 Applicant claims small entity status.<br>See 37 CFR 1.27.  |                          | 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)               |  |  |  |  |
| 3. Specification [ To (preferred arrangement set forth below)  | otal Pages 28            |  |  |  |  |  |
| Descriptive title of the Invention     Cross Reference to Related Applications   |                          | b. Specification Sequence Listing on:  |  |  |  |  |
| <ul> <li>Statement Regarding Fed sponsored R &amp; D</li> <li>Reference to sequence listing, a table,<br/>or a computer program listing appendix</li> </ul>  |                          | i. CD-ROM or CD-R (2 copies); or   |  |  |  |  |
| <ul> <li>Background of the Invention</li> <li>Brief Summary of the Invention</li> </ul>  |                          | i i paper  C. Statements verifying identity of above copies                                      |  |  |  |  |
| <ul> <li>Brief Description of the Drawings (if filed)</li> <li>Detailed Description</li> </ul>   |                          | c. Statements verifying identity of above copies  ACCOMPANYING APPLICATION PARTS                 |  |  |  |  |
| <ul><li>Claim(s)</li><li>Abstract of the Disclosure</li></ul>  |                          | 9. Assignment Papers (cover sheet & documents(s))  |  |  |  |  |
| 4. X Drawing(s) (35 U.S.C. 113) [ To   | otal Sheets 10           | 27 CER 2 72/h) Statement   |  |  |  |  |
| 5. Oath or Declaration [ 76  | tal Pages 1              | 1 ] 11. English Translation Document (if applicable)   |  |  |  |  |
| a. Newly Executed (original or copy)   |                          | 12. X Information Disclosure Statement (IDS)/PTO-1449 X Copies of IDS Citations                  |  |  |  |  |
| b. X Copy from a prior application (37 CFR (for continuation/divisional with Box 18  | 1.63(d))<br>3 completed) | 13. X Preliminary Amendment  |  |  |  |  |
| i. <u>DELETION OF INVEN</u>  | TOR(S)                   | 14. X Return Receipt Postcard (MPEP 503) (Should be specifically itemized)                       |  |  |  |  |
| Signed statement attached dinamed in the prior application   | eleting inventor(s)      | Certified Copy of Priority Document(s) (if foreign priority is claimed)                          |  |  |  |  |
| 1.63(d)(2) and 1.33(b).  |                          | Request and Certification under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 |  |  |  |  |
| or its equivalent.   |                          |  |  |  |  |  |
| 17 Other:  18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment,  |                          |  |  |  |  |  |
| or in an Application Data Sheet under 37 CFR 1.76.   |                          |  |  |  |  |  |
| Continuation Divisional Continuation-in-part (CIP) of prior application No:10/269,226  Prior application information: Examiner:Chandra P. Chaudhari Group / Art Unit:2813  |                          |  |  |  |  |  |
| For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. |                          |  |  |  |  |  |
| 19. CORRESPONDENCE ADDRESS   |                          |  |  |  |  |  |
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| Name (Print/Type) Rose Alyssa  |                          | Registration No. (Attorney/Agent) Reg. No. 35, 095   |  |  |  |  |
| Signature More Alyman Jungy Date 2/24/04   |                          |  |  |  |  |  |

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office. Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

PTO/SB/17 (1/98)

Approved for use through 09/30/2000. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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| FEE TRANSMITTAL                                    |   |                     | Complete If Known  |              |             |                                  |  |             |
|--|---|---------------------|--|--------------|-------------|----------------------------------|--|-------------|
|  |   |                     | Application Number TBD                                   |              |             |                                  |  |             |
| for FY 2003  |   |                     | Filing Date First Named Inventor                         |              |             | <del></del>                      | Herewith   |             |
|  |   |                     |  |              |             |                                  | Kaiping Liu Chandra P. Chaudh                    | ari         |
| Express Mailing Label No.: EV                      | /333323979US  | <u> </u>            | Examiner Name Chandra P. Chaudhari Group / Art Unit 2813 |              |             | <u> </u>                         |  |             |
| TOTAL AMOUNT OF PAYMENT (\$) 770.00                |   |                     | Attorney Docket No. TI-34717.1                           |              |             |                                  |  |             |
| METHOD OF PAY                                      |   | ===                 |  |              | EEE (       | ALCULATION                       | ON (continued)                                   |             |
|  |   |                     |  |              |             | ALCOLATI                         | ON (continued)                                   |             |
| The Commissioner is hereby au     Deposit Account, | uthorized to charge to the following                            | 3.                  | ADDIT  | UNAL         | FEE5        |                                  |  |             |
| Deposit Account                                    | 20-0668   | Large               | Entity   |              | Entity      |                                  |  |             |
| Number   |   | Fee<br>Code         | Fee<br>(\$)  | Fee<br>Code  | Fee<br>(\$) | Fee                              | Description                                      | Fee Paid    |
| Deposit Account Toyas Instru                       | ments Incorporated  |                     | 130  | 2051         | 65          | Surcharge - late                 | e filing fee                                     |             |
| Name Texas institu                                 | intents incorporated  | 1052                | 50   | 2052         | 25          | Surcharge - late<br>cover sheet. | e provisional filing fee or                      |             |
| Charge any additional for                          | Charge all indicated feed and                                   |                     |  |              |             |                                  |  | <del></del> |
| Charge any additional fee required or credit any   | Charge all indicated fees and<br>any additional fee required or | 1053                | 053 130 1053 130 Non-English specification               |              | ecification | 1                                |  |             |
| overpayment  | credit any overpayment  | 1812                | 2,520  | 1812         | 2,520       | For filing a regu                | uest for reexamination                           |             |
| a □ <b>a</b> .=                                    |   | 1804                | 920*   |              |             |                                  | blication of SIR prior to                        | <b></b>     |
| 2. Payment Enclosed:                               |   | .004                |  | 1007         | 720         | Examiner actio                   |  |             |
| Check Mone   | • 1 1   | 1805                | 1,840*   | 1805         | 1,840*      |                                  | blication of SIR after                           |             |
| Orde   |   |                     |  |              |             | Examiner actio                   |  |             |
| FEE CALCULA  | ATION   |                     | 110  | 2251         | 55          |                                  | eply within first month                          |             |
| 1. BASIC FILING FEE                                |   | 1252                | 420  | 2252         | 200         |                                  | ne within second month                           |             |
| Large Entity Small Entity                          |   | 1253                | 950  | 2253         | 460         |                                  | ne within third month<br>ne within fourth month  |             |
| Fee Fee Fee Fe                                     | ee Description Fee Paid   | 1254<br>1255        | 1,480  | 2254<br>2255 | 720<br>980  |                                  | ne within fifth month                            |             |
| Code (\$) Code (\$)                                |   |                     | 2,010  |              |             |                                  |  |             |
|  | Utility filing fee \$770  | 1401<br>1402        | 330<br>330   | 2401<br>2402 | 160<br>160  | Notice of Appe                   | support of an appeal                             |             |
|  | esign filing fee \$   | 1403                | 290  | 2402         |             | Request for ora                  | *          |             |
|  | Plant filing fee \$   | 1451                | 1,510  |              | 1,510       | •                                | tute a pubic use proceedin                       | g           |
|  | eissue filing fee \$  | 1452                | 110  | 2452         | 55          | Petition to revi                 | ve - unavoidable                                 |             |
| 1005 160 2005 80 Pro                               | ovisional filing fee \$   | 1453                | 1,330  | 2453         | 640         | Petition to revi                 | ve - unintentional                               |             |
| SUB  | STOTAL (1) (\$)770  | 1501                | 1,280  | 2501         | 640         | Utility issue fee                |  |             |
|  |   | 1502                | 460  | 2502         | 230         | Design issue fe                  |  |             |
| 2. EXTRA CLAIM FEES                                |   | 1503                | 620  | 2503         | 310         | Plant issue fee                  |  |             |
|  | Fee from  | 1460<br>1801        | 130<br>770   | 1460<br>2801 | 130<br>370  |                                  | e Commissioner<br>ontinued Examination (RCE      | :\          |
| Extra Claims                                       | s below Fee Paid  | 1806                | 180  | 1806         | 180         | •                                | Information Disclosure Str                       |             |
| Total Claims 13 -20**= 0                           | x 18 = 0  | 8021                |  | 8021         |             |                                  |  |             |
| Independent 1 -3** = 0                             | x 86 = 0  | 0021                | 40   | 0021         | 40          |                                  | h patent assignment per<br>number of properties) |             |
| Claims   |   | 1809                | 740  | 2809         | 370         | Filing a submis                  | ssion after final rejection (3                   | 7           |
| Multiple Dependent                                 | 260 =   |                     |  |              |             | CFR 1.129(a))                    |  |             |
|  |   | 1810                | 740  | 2801         | 370         | For each addit<br>examined (37   | ional invention to be                            | <del></del> |
| **or number previously paid, if greater; For Reiss | sue, see below  |                     |  |              |             | examineu (57                     | CFR 1.128(0))                                    |             |
| Large Entity Small Entity                          |   |                     |  |              |             |                                  |  |             |
| Fee Fee Fee<br>Code (\$) Code (\$)                 | Fee Description   |                     |  |              |             |                                  |  |             |
|  | aims in excess of 20  | Othe                | er fee (s  | pecify       | )           |                                  |  |             |
| 1201 86 2201 42 Ind                                | dependent Claims in excess of 3                                 |                     |  |              |             |                                  |  | L           |
|  | ultiple dependent claims in excess of 3                         |                     |  |              |             |                                  |  |             |
|  | Reissue independent claims over                                 |                     |  |              |             |                                  |  |             |
| · · · · · · · · · · · · · · · · · · ·              | ginal patent  | Other fee (specify) |  |              |             |                                  |  |             |
|  | **Reissue claims in excess of 20 and over original patent       |                     |  | <u> </u>     |             |                                  |  |             |
| SUB  | SUBTOTAL (2) (\$)0  |                     |  | asic Filin   | g Fee Paic  | 1                                | SUBTOTAL (3)                                     | 0           |
|  |   |                     |  |              |             |                                  | Complete (if one                                 | dicable)    |
| SUBMITTED BY                                       |   |                     |  |              |             | Complete (if applicable)         |  |             |
| Typed or Printed Name Rose Alvssa Keagy            |   |                     | ·  |              |             |                                  | Reg. Number                                      | 35,095      |
| Signature  | Was Attanto   | le                  | m .  | 2/2          | Date /      | /                                | Deposit Account User ID                          |             |
| Organization                                       | The ward hand   | 7                   | 12   | 7            | 7/04        | <u> </u>                         |  |             |